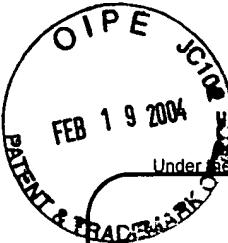


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PTO/SB/21 (05-03)

Approved for use through 04/30/2003. OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL  
FORM

(to be used for all correspondence after initial filing)

## OFFICE OF PETITIONS

09/495,105

|                      |                         |
|----------------------|-------------------------|
| Filing Date          | February 1, 2000        |
| First Named Inventor | Graham B. McCloy et al. |
| Art Unit             | 2875                    |
| Examiner Name        | Thomas M. Sember        |

Total Number of Pages in This Submission

Attorney Docket Number

SCH-00026

## ENCLOSURES (Check all that apply)

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                           |                                                                                                                                                                                                             |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Fee Transmittal Form                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> Drawing(s)                                       | <input type="checkbox"/> After Allowance communication to Group                                                                                                                                             |
| <input checked="" type="checkbox"/> Fee Attached                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> Licensing-related Papers                         | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences                                                                                                                         |
| <input checked="" type="checkbox"/> Amendment/Reply                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <input checked="" type="checkbox"/> Petition                              | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)                                                                                                                  |
| <input checked="" type="checkbox"/> After Final                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information                                                                                                                                                            |
| <input type="checkbox"/> Affidavits/declaration(s)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> Power of Attorney, Revocation                    | <input type="checkbox"/> Status Letter                                                                                                                                                                      |
| <input type="checkbox"/> Extension of Time Request                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> Change of Correspondence Address                 | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):                                                                                                                             |
| <input type="checkbox"/> Express Abandonment Request                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/> Terminal Disclaimer                              | Petition under 37CFR 1.181(a) to Withdraw the Holding of Abandonment and a Provisional Petition to Revive under 37 CFR 1.137(b) and a Request for Re-Entry of the Previously Filed Continuation Application |
| <input type="checkbox"/> Information Disclosure Statement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/> Request for Refund                               |                                                                                                                                                                                                             |
| <input type="checkbox"/> Certified Copy of Priority Document(s)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> CD, Number of CD(s) _____                        |                                                                                                                                                                                                             |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                           |                                                                                                                                                                                                             |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                           |                                                                                                                                                                                                             |
| Remarks                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                           |                                                                                                                                                                                                             |
| Other Enclosures (cont.): Amendment in Response to Decision on Appeal for Entry upon the Grant of the Petition to Withdraw the Holding of Abandonment or the Petition to Revive the Application under 37 CFR 1.137(c); Alternate Amendment in Response to the Decision on Appeal to be Entered upon the Grant of the Petition for Withdrawal of the Holding of Abandonment or the Provisional Petition to Revive under 37 CFR 1.137(c); Request for Continued Examination Transmittal (in duplicate); Request for Continued Examination (RCE) under 37 CFR 1.114 to be Entered upon the Grant of the 37 CFR 1.181(a) Petition to Withdraw the Holding of Abandonment or the Provisional Petition to Revive under 37 CFR 1.137(b); Return Receipt Postcard |                                                                           |                                                                                                                                                                                                             |

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|                         |                                                                   |
|-------------------------|-------------------------------------------------------------------|
| Firm or Individual name | Warn, Burgess & Hoffmann, P.C.<br>Gregory L. Ozga - Reg No. 53425 |
| Signature               |                                                                   |
| Date                    | February 13, 2004                                                 |

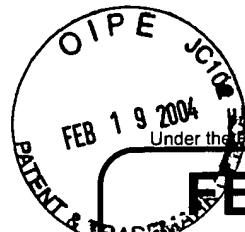
## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

|                       |                                  |      |                   |
|-----------------------|----------------------------------|------|-------------------|
| Typed or printed name | Gregory L. Ozga - Reg. No. 53425 |      |                   |
| Signature             |                                  | Date | February 13, 2004 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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# FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** **(\$)** 2,100.00
**Complete if Known**

|                      |                                      |
|----------------------|--------------------------------------|
| Application Number   | 09/495,105                           |
| Filing Date          | February 19, 2004 <b>RECEIVED</b>    |
| First Named Inventor | Graham B. McCloy et al.              |
| Examiner Name        | Thomas M. Schemberg 5 2004           |
| Art Unit             | 2875                                 |
| Attorney Docket No.  | SCH-00026 <b>OFFICE OF PETITIONS</b> |

**METHOD OF PAYMENT** (check all that apply)
 Check  Credit card  Money Order  Other  None

 Deposit Account:

Deposit Account Number **501612**  
Deposit Account Name **Warn, Burgess & Hoffmann, P.C.**

The Director is authorized to: (check all that apply)

 Charge fee(s) indicated below  Credit any overpayments  
 Charge any additional fee(s) or any underpayment of fee(s)  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.
**FEE CALCULATION****1. BASIC FILING FEE**

| Large Entity        | Small Entity | Fee Code (\$)          | Fee Code (\$) | Fee Description | Fee Paid |
|---------------------|--------------|------------------------|---------------|-----------------|----------|
| 1001 770            | 2001 385     | Utility filing fee     |               |                 |          |
| 1002 340            | 2002 170     | Design filing fee      |               |                 |          |
| 1003 530            | 2003 265     | Plant filing fee       |               |                 |          |
| 1004 770            | 2004 385     | Reissue filing fee     |               |                 |          |
| 1005 160            | 2005 80      | Provisional filing fee |               |                 |          |
| <b>SUBTOTAL (1)</b> |              | <b>(\$)</b> 0.00       |               |                 |          |

**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

| Total Claims | Independent Claims | Multiple Dependent | Extra Claims | Fee from below | Fee Paid |
|--------------|--------------------|--------------------|--------------|----------------|----------|
|              |                    |                    | -20**        | = <b>0.00</b>  |          |
|              |                    |                    | - 3**        | = <b>0.00</b>  |          |
|              |                    |                    |              | = <b>0.00</b>  |          |

| Large Entity        | Small Entity  | Fee Description                                            |
|---------------------|---------------|------------------------------------------------------------|
| Fee Code (\$)       | Fee Code (\$) |                                                            |
| 1202 18             | 2202 9        | Claims in excess of 20                                     |
| 1201 86             | 2201 43       | Independent claims in excess of 3                          |
| 1203 290            | 2203 145      | Multiple dependent claim, if not paid                      |
| 1204 86             | 2204 43       | ** Reissue independent claims over original patent         |
| 1205 18             | 2205 9        | ** Reissue claims in excess of 20 and over original patent |
| <b>SUBTOTAL (2)</b> |               | <b>(\$)</b> 0.00                                           |

\*\*or number previously paid, if greater; For Reissues, see above

**3. ADDITIONAL FEES**

| Large Entity | Small Entity | Fee Description                                                            | Fee Paid |
|--------------|--------------|----------------------------------------------------------------------------|----------|
| 1051 130     | 2051 65      | Surcharge - late filing fee or oath                                        |          |
| 1052 50      | 2052 25      | Surcharge - late provisional filing fee or cover sheet                     |          |
| 1053 130     | 1053 130     | Non-English specification                                                  |          |
| 1812 2,520   | 1812 2,520   | For filing a request for ex parte reexamination                            |          |
| 1804 920*    | 1804 920*    | Requesting publication of SIR prior to Examiner action                     |          |
| 1805 1,840*  | 1805 1,840*  | Requesting publication of SIR after Examiner action                        |          |
| 1251 110     | 2251 55      | Extension for reply within first month                                     |          |
| 1252 420     | 2252 210     | Extension for reply within second month                                    |          |
| 1253 950     | 2253 475     | Extension for reply within third month                                     |          |
| 1254 1,480   | 2254 740     | Extension for reply within fourth month                                    |          |
| 1255 2,010   | 2255 1,005   | Extension for reply within fifth month                                     |          |
| 1401 330     | 2401 165     | Notice of Appeal                                                           |          |
| 1402 330     | 2402 165     | Filing a brief in support of an appeal                                     |          |
| 1403 290     | 2403 145     | Request for oral hearing                                                   |          |
| 1451 1,510   | 1451 1,510   | Petition to institute a public use proceeding                              |          |
| 1452 110     | 2452 55      | Petition to revive - unavoidable                                           |          |
| 1453 1,330   | 2453 665     | Petition to revive - unintentional                                         | 1,330.00 |
| 1501 1,330   | 2501 665     | Utility issue fee (or reissue)                                             |          |
| 1502 480     | 2502 240     | Design issue fee                                                           |          |
| 1503 640     | 2503 320     | Plant issue fee                                                            |          |
| 1460 130     | 1460 130     | Petitions to the Commissioner                                              |          |
| 1807 50      | 1807 50      | Processing fee under 37 CFR 1.17(q)                                        |          |
| 1806 180     | 1806 180     | Submission of Information Disclosure Stmt                                  |          |
| 8021 40      | 8021 40      | Recording each patent assignment per property (times number of properties) |          |
| 1809 770     | 2809 385     | Filing a submission after final rejection (37 CFR 1.129(a))                |          |
| 1810 770     | 2810 385     | For each additional invention to be examined (37 CFR 1.129(b))             |          |
| 1801 770     | 2801 385     | Request for Continued Examination (RCE)                                    | 770.00   |
| 1802 900     | 1802 900     | Request for expedited examination of a design application                  |          |

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3)** **(\$)** 2,100.00**SUBMITTED BY**

(Complete if applicable)

|                   |                        |                                   |       |                          |
|-------------------|------------------------|-----------------------------------|-------|--------------------------|
| Name (Print/Type) | Gregory L. Ozga        | Registration No. (Attorney/Agent) | 53425 | Telephone (248) 364-4300 |
| Signature         | <i>Gregory L. Ozga</i> |                                   | Date  | February 13, 2004        |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.